


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 8:00 am
Secretary of State

03-31-2008 90014 045 ****61.25

DOCUMENT # 766345					
1. Entity Name FRIENDS OF THE HOBE SOUND LIBRARY, INC.					
Principal Place of Business 10595 SE FEDERAL HWY HOBE SOUND, FL 33-4556			Mailing Address PO BOX 602 HOBE SOUND, FL 33475-7602		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2274663	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
INMAN, MARY JANE 8492 SE DRIFTWOOD ST. HOBE SOUND, FL 33455			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DUXBURY, JUDY		NAME	BOBBI KAUFFMAN	
STREET ADDRESS	12142 SE HECKLER DR		STREET ADDRESS	9806 S.E. MERCURY ST.	
CITY-ST-ZIP	HOBE SOUND, FL 33455		CITY-ST-ZIP	HOBE SOUND, FL 33455	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	SECRETARY - DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LOPOPOLO, MARY		NAME	MARY MORETT	
STREET ADDRESS	8192 SE CUMBERLAND CR		STREET ADDRESS	6968 S.E. DELEGATE ST	
CITY-ST-ZIP	HOBE SOUND, FL 33455		CITY-ST-ZIP	HOBE SOUND, FL 33455	
TITLE	V	<input checked="" type="checkbox"/> Delete	TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MEYER, B J		NAME	KATHY TURRELL	
STREET ADDRESS	8885 SE HARBOR ISLAND WAY		STREET ADDRESS	6120 S.E. GEORGETOWN PLACE	
CITY-ST-ZIP	HOBE SOUND, FL 33455		CITY-ST-ZIP	HOBE SOUND, FL 33455	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	VICE PRESIDENT - DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WETHERBY, JEANNE		NAME	DIANE HOWLAND	
STREET ADDRESS	9307 SE MAST TERRACE		STREET ADDRESS	8201 S.E. EAGLEWOOD WAY	
CITY-ST-ZIP	HOBE SOUND, FL 33455		CITY-ST-ZIP	HOBE SOUND, FL 33455	
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBINSON, MARY		NAME		
STREET ADDRESS	8201 SE ROYAL STREET		STREET ADDRESS		
CITY-ST-ZIP	HOBE SOUND, FL 33455		CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPURGEON, KATHY		NAME		
STREET ADDRESS	P.O. BOX 744		STREET ADDRESS		
CITY-ST-ZIP	HOBE SOUND, FL 33475		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Judy Duxbury</i>		JUDY DUXBURY		03/26/08 772-546-5739	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	

ATTACHMENT
400541081
#766345

DIRECTORS

Jerry Blumengarten	2009	9240 S. E. La Creek Court	Hobe Sound	Florida	33455
Helen Fraas	2010	12890 S. E. Laurel Valley Lane	Hobe Sound	Florida	33455
Jenny Fread	2010	6261 S. E. Tory Place	Hobe Sound	Florida	33455
Marta Gordon	2009	116 North Beach Road	Hobe Sound	Florida	33455
Elizabeth Hubbard	2010	10964 S. E. Sea Pine Circle	Hobe Sound	Florida	33455
Mary Jane Inman	2010	8492 S. E. Driftwood Street	Hobe Sound	Florida	33455
Evie McAllister	2011	10650 S. E. Jupiter Narrows Drive	Hobe Sound	Florida	33455
Marion McCarter	2010	105 Lakeside Village	Hobe Sound	Florida	33455
Marguerite Probst	2011	7615 S. E. Fiddlewood Lane	Hobe Sound	Florida	33455
Irell Rohl	2010	8944 S. E. Pelican Island Way	Hobe Sound	Florida	33455
Judy Sprague	2009	10901 S. W. Hawk View Circle	Stuart	Florida	34997